

House File 2248

S-5065

1 Amend House File 2248, as passed by the House, as follows:

2 1. Page 1, before line 1 by inserting:

3 <DIVISION I  
4 AMBULATORY SURGICAL CENTER — INFORMATION AND REFERRAL>

5 2. Page 2, after line 20 by inserting:

6 <DIVISION \_\_\_\_  
7 CERTIFICATE OF NEED

8 Sec. \_\_\_\_ . Section 135.61, Code 2022, is amended by adding  
9 the following new subsections:

10 NEW SUBSECTION. 2A. "*Birthing hospital*" means the same as  
11 defined in section 135.131.

12 NEW SUBSECTION. 15A. "*Mental health services*" means  
13 services provided by a mental health professional as defined in  
14 section 228.1 operating within the scope of the professional's  
15 practice which address mental, emotional, medical, or  
16 behavioral problems.

17 NEW SUBSECTION. 18A. "*Nursing facility*" means the same as  
18 defined in section 135C.1.

19 NEW SUBSECTION. 21A. "*Psychiatric services*" means services  
20 provided under the direction of a physician which address  
21 mental, emotional, medical, or behavioral problems.

22 Sec. \_\_\_\_ . Section 135.61, subsections 12, 14, and 18, Code  
23 2022, are amended to read as follows:

24 12. "*Health services*" means clinically related diagnostic,  
25 curative, or rehabilitative services, ~~and includes~~ but does not  
26 include alcoholism services, drug-abuse substance use disorder  
27 services, and mental health services, psychiatric services, or  
28 obstetrical and gynecological services.

29 14. "*Institutional health facility*" means any of the  
30 following, without regard to whether the facilities referred  
31 to are publicly or privately owned or are organized for profit  
32 or not or whether the facilities are part of or sponsored by a  
33 health maintenance organization:

34 a. A hospital.

35 b. A health care facility.

1 c. An organized outpatient health facility.

2 d. An outpatient surgical facility.

3 ~~e. A community mental health facility.~~

4 ~~f. A birth center.~~

5 18. "New institutional health service" or "changed  
6 institutional health service" means any of the following:

7 a. (1) The construction, development, or other  
8 establishment of a new institutional health facility other than  
9 a nursing facility regardless of ownership with a value in  
10 excess of five million dollars.

11 (2) The construction, development, or other establishment  
12 of a nursing facility regardless of ownership.

13 b. Relocation of an institutional health facility.

14 c. (1) Any capital expenditure, lease, or donation by or on  
15 behalf of an institutional health facility other than a nursing  
16 facility in excess of ~~one~~ five million ~~five hundred thousand~~  
17 dollars within a twelve-month period.

18 (2) Any capital expenditure, lease, or donation by or on  
19 behalf of a nursing facility in excess of one million five  
20 hundred thousand dollars within a twelve-month period.

21 d. A permanent change in the bed capacity, as determined  
22 by the department, of an institutional health facility. For  
23 purposes of this paragraph, a change is permanent if it is  
24 intended to be effective for one year or more.

25 e. (1) Any expenditure in excess of ~~five hundred thousand~~  
26 million dollars by or on behalf of an institutional health  
27 facility other than a nursing facility for health services  
28 which are or will be offered in or through an institutional  
29 health facility at a specific time but which were not offered  
30 on a regular basis in or through that institutional health  
31 facility within the twelve-month period prior to that time.

32 (2) Any expenditure in excess of five hundred thousand  
33 dollars by or on behalf of a nursing facility for health  
34 services which are or will be offered in or through a nursing  
35 facility at a specific time but which were not offered on a

1 regular basis in or through that nursing facility within the  
2 twelve-month period prior to that time.

3 *f.* The deletion of one or more health services, previously  
4 offered on a regular basis by an institutional health facility  
5 or health maintenance organization or the relocation of one or  
6 more health services from one physical facility to another.

7 *g.* Any acquisition by or on behalf of a health care provider  
8 or a group of health care providers of any piece of replacement  
9 equipment with a value in excess of one three million five  
10 ~~hundred thousand~~ dollars, whether acquired by purchase, lease,  
11 or donation.

12 *h.* Any acquisition by or on behalf of a health care  
13 provider or group of health care providers of any piece of  
14 equipment with a value in excess of one three million five  
15 ~~hundred thousand~~ dollars, whether acquired by purchase, lease,  
16 or donation, which results in the offering or development of  
17 a health service not previously provided. A mobile service  
18 provided on a contract basis is not considered to have been  
19 previously provided by a health care provider or group of  
20 health care providers.

21 *i.* (1) Any acquisition by or on behalf of an institutional  
22 health facility other than a nursing facility or a health  
23 maintenance organization of any piece of replacement equipment  
24 with a value in excess of one three million five hundred  
25 ~~thousand~~ dollars, whether acquired by purchase, lease, or  
26 donation.

27 (2) Any acquisition by or on behalf of a nursing facility of  
28 any piece of replacement equipment with a value in excess of  
29 one million five hundred thousand dollars, whether acquired by  
30 purchase, lease, or donation.

31 *j.* (1) Any acquisition by or on behalf of an institutional  
32 health facility other than a nursing facility or health  
33 maintenance organization of any piece of equipment with a value  
34 in excess of one three million five hundred thousand dollars,  
35 whether acquired by purchase, lease, or donation, which

1 results in the offering or development of a health service not  
2 previously provided. A mobile service provided on a contract  
3 basis is not considered to have been previously provided by an  
4 institutional health facility.

5 (2) Any acquisition by or on behalf of a nursing facility  
6 of any piece of equipment with a value in excess of one  
7 million five hundred thousand dollars, whether acquired by  
8 purchase, lease, or donation, which results in the offering or  
9 development of a health service not previously provided.

10 ~~k. Any air transportation service for transportation of~~  
11 ~~patients or medical personnel offered through an institutional~~  
12 ~~health facility at a specific time but which was not offered~~  
13 ~~on a regular basis in or through that institutional health~~  
14 ~~facility within the twelve-month period prior to the specific~~  
15 ~~time.~~

16 ~~l. k.~~ Any mobile health service with a value in excess of  
17 one three million five hundred thousand dollars.

18 ~~m. l.~~ Any of the following services with a value in excess  
19 of five million dollars:

20 (1) Cardiac catheterization service.

21 (2) Open heart surgical service.

22 (3) Organ transplantation service.

23 (4) Radiation therapy service applying ionizing radiation  
24 for the treatment of malignant disease using megavoltage  
25 external beam equipment.

26 Sec. \_\_\_\_\_. Section 135.63, subsection 1, Code 2022, is  
27 amended to read as follows:

28 1. A new institutional health service or changed  
29 institutional health service shall not be offered or developed  
30 in this state without prior application to the department  
31 for and receipt of a certificate of need, pursuant to  
32 this subchapter. The application shall be made upon forms  
33 furnished or prescribed by the department and shall contain  
34 such information as the department may require under this  
35 subchapter. The application shall be accompanied by a fee

1 equivalent to three-tenths of one percent of the anticipated  
2 cost of the project with a minimum fee of six hundred dollars  
3 and a maximum fee of twenty-one thousand dollars. The fee  
4 shall be remitted by the department to the treasurer of  
5 state, who shall place it in the general fund of the state.  
6 If an application is voluntarily withdrawn within thirty  
7 calendar days after submission, seventy-five percent of the  
8 application fee shall be refunded; if the application is  
9 voluntarily withdrawn more than thirty but within sixty days  
10 after submission, fifty percent of the application fee shall  
11 be refunded; if the application is withdrawn voluntarily more  
12 than sixty days after submission, twenty-five percent of  
13 the application fee shall be refunded. Notwithstanding the  
14 required payment of an application fee under [this subsection](#),  
15 an applicant for a new institutional health service or a  
16 changed institutional health service offered or developed by  
17 an intermediate care facility for persons with an intellectual  
18 disability ~~or an intermediate care facility for persons with~~  
19 ~~mental illness~~ as defined pursuant to [section 135C.1](#) is exempt  
20 from payment of the application fee.

21 Sec. \_\_\_\_\_. Section 135.63, subsection 2, paragraph a, Code  
22 2022, is amended to read as follows:

23 a. Private offices and private clinics of an individual  
24 physician, dentist, or other practitioner or group of  
25 health care providers, except as provided by section 135.61,  
26 subsection 18, paragraphs "g", "h", and ~~"m"~~ "l", and section  
27 135.61, subsections 20 and 21.

28 Sec. \_\_\_\_\_. Section 135.63, subsection 2, paragraph e,  
29 subparagraph (1), Code 2022, is amended to read as follows:

30 (1) Constructs, develops, renovates, relocates, or  
31 otherwise establishes an institutional health facility as  
32 specified under section 135.61, subsection 18.

33 Sec. \_\_\_\_\_. Section 135.63, subsection 2, Code 2022, is  
34 amended by adding the following new paragraphs:

35 NEW PARAGRAPH. g. An institutional health facility that is

1 a health care facility, a hospital or portion of a hospital,  
2 or any other facility that is engaged primarily in providing  
3 mental health services or psychiatric services including but  
4 not limited to an intermediate care facility for persons with  
5 mental illness as defined in section 135C.1, a psychiatric  
6 medical institution for children licensed pursuant to chapter  
7 135H, a community mental health center organized under chapter  
8 230A or other community mental health facility, or a state  
9 mental health institute designated by chapter 226.

10 NEW PARAGRAPH. *r.* A birth center or a birthing hospital.  
11 Sec. \_\_\_\_\_. Section 135H.6, Code 2022, is amended to read as  
12 follows:

13 **135H.6 Inspection — conditions for issuance.**

14 1. The department shall issue a license to an applicant  
15 under [this chapter](#) if all the following conditions exist:

16 *a.* The department has ascertained that the applicant's  
17 medical facilities and staff are adequate to provide the care  
18 and services required of a psychiatric institution.

19 *b.* The proposed psychiatric institution is accredited  
20 by the joint commission on the accreditation of health  
21 care organizations, the commission on accreditation of  
22 rehabilitation facilities, the council on accreditation of  
23 services for families and children, or by any other recognized  
24 accrediting organization with comparable standards acceptable  
25 under federal regulation.

26 *c.* The applicant complies with applicable state rules  
27 and standards for a psychiatric institution adopted by the  
28 department in accordance with federal requirements under 42  
29 C.F.R. §441.150 – 441.156.

30 ~~*d.* The applicant has been awarded a certificate of need  
31 pursuant to [chapter 135](#), unless exempt as provided in this  
32 section.~~

33 ~~*e.*~~ *d.* The department of human services has submitted  
34 written approval of the application based on the department of  
35 human services' determination of need. The department of human

1 services shall identify the location and number of children in  
2 the state who require the services of a psychiatric medical  
3 institution for children. Approval of an application shall be  
4 based upon the location of the proposed psychiatric institution  
5 relative to the need for services identified by the department  
6 of human services and an analysis of the applicant's ability to  
7 provide services and support consistent with requirements under  
8 chapter 232, particularly regarding community-based treatment.  
9 If the proposed psychiatric institution is not freestanding  
10 from a facility licensed under [chapter 135B](#) or [135C](#), approval  
11 under this paragraph shall not be given unless the department  
12 of human services certifies that the proposed psychiatric  
13 institution is capable of providing a resident with a living  
14 environment similar to the living environment provided by a  
15 licensee which is freestanding from a facility licensed under  
16 chapter 135B or [135C](#).

17 ~~f.~~ e. The proposed psychiatric institution is under  
18 the direction of an agency which has operated a facility  
19 licensed under [section 237.3, subsection 2](#), paragraph "a", as  
20 a comprehensive residential facility for children for three  
21 years or of an agency which has operated a facility for three  
22 years providing psychiatric services exclusively to children or  
23 adolescents and the facility meets or exceeds requirements for  
24 licensure under [section 237.3, subsection 2](#), paragraph "a", as a  
25 comprehensive residential facility for children.

26 ~~g.~~ f. If a child has an emotional, behavioral, or mental  
27 health disorder, the psychiatric institution does not require  
28 court proceedings to be initiated or that a child's parent,  
29 guardian, or custodian must terminate parental rights over  
30 or transfer legal custody of the child for the purpose of  
31 obtaining treatment from the psychiatric institution for the  
32 child. Relinquishment of a child's custody shall not be a  
33 condition of the child receiving services.

34 2. The department of human services shall not give approval  
35 to an application which would cause the total number of beds

1 licensed under [this chapter](#) for services reimbursed by the  
2 medical assistance program under [chapter 249A](#) to exceed four  
3 hundred thirty beds.

4 3. In addition to the beds authorized under [subsection 2](#),  
5 the department of human services may establish not more than  
6 thirty beds licensed under [this chapter](#) at the state mental  
7 health institute at Independence. ~~The beds shall be exempt~~  
8 ~~from the certificate of need requirement under [subsection 1](#),~~  
9 ~~paragraph "d".~~

10 4. The department of human services may give approval to  
11 conversion of beds approved under [subsection 2](#), to beds which  
12 are specialized to provide substance abuse treatment. However,  
13 the total number of beds approved under [subsection 2](#) and this  
14 subsection shall not exceed four hundred thirty. ~~Conversion~~  
15 ~~of beds under [this subsection](#) shall not require a revision of~~  
16 ~~the certificate of need issued for the psychiatric institution~~  
17 ~~making the conversion.~~ Beds for children who do not reside  
18 in this state and whose service costs are not paid by public  
19 funds in this state are not subject to the limitations on the  
20 number of beds and ~~certificate of need requirements~~ otherwise  
21 applicable under [this section](#).

22 5. A psychiatric institution licensed prior to July 1, 1999,  
23 may exceed the number of beds authorized under [subsection 2](#)  
24 if the excess beds are used to provide services funded from a  
25 source other than the medical assistance program under chapter  
26 249A. Notwithstanding [subsection 1](#), ~~paragraphs~~ paragraph "d"  
27 ~~and "e"~~, and [subsection 2](#), the provision of services using those  
28 excess beds does not require ~~a certificate of need or~~ a review  
29 by the department of human services.

30 6. A psychiatric institution shall be exempt from the  
31 certificate of need requirements pursuant to section 135.63.

32 Sec. \_\_\_\_ . ADMINISTRATIVE RULES. The department of public  
33 health, in accordance with section 135.72, may adopt rules  
34 pursuant to chapter 17A to administer this division of this  
35 Act.

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DIVISION \_\_\_\_

RURAL EMERGENCY HOSPITALS

Sec. \_\_\_\_ . Section 135B.1, Code 2022, is amended by adding the following new subsections:

NEW SUBSECTION. 5. *"Rural emergency hospital"* means a facility that provides rural emergency hospital services in the facility twenty-four hours per day, seven days per week; does not provide any acute care inpatient services with the exception of any distinct part of the facility licensed as a skilled nursing facility providing posthospital extended care services; and meets the criteria specified in section 135B.1A and the federal Consolidated Appropriations Act, Pub. L. No. 116-260, §125.

NEW SUBSECTION. 6. *"Rural emergency hospital services"* means the following services provided by a rural emergency hospital that do not exceed an annual per patient average of twenty-four hours in such a rural emergency hospital:

a. Emergency department services and observation care. For purposes of providing emergency department services, an emergency department of a rural emergency hospital shall be considered staffed if a physician, nurse practitioner, clinical nurse specialist, or physician assistant is available to furnish rural emergency hospital services in the facility twenty-four hours per day.

b. At the election of the rural emergency hospital, with respect to services furnished on an outpatient basis, other medical and health services as specified in regulations adopted by the United States secretary of health and human services.

Sec. \_\_\_\_ . NEW SECTION. 135B.1A Rural emergency hospital licensure.

1. The department shall adopt rules pursuant to chapter 17A to establish minimum standards for the licensure of rural emergency hospitals consistent with the federal Consolidated Appropriations Act, Pub. L. No. 116-260, §125, and with regulations issued by the United States secretary of health and

1 human services for rural emergency hospitals.

2 2. To be eligible for a rural emergency hospital license, a  
3 facility shall have been, on or before December 27, 2020, one  
4 of the following:

5 a. A licensed critical access hospital.

6 b. A general hospital with not more than fifty licensed  
7 beds located in a county in a rural area as defined in section  
8 1886(d)(2)(D) of the federal Social Security Act.

9 c. A general hospital with no more than fifty licensed beds  
10 that is deemed as being located in a rural area pursuant to  
11 section 1886(d)(8)(E) of the federal Social Security Act.

12 Sec. \_\_\_\_\_. Section 135B.2, Code 2022, is amended to read as  
13 follows:

14 **135B.2 Purpose.**

15 The purpose of [this chapter](#) is to provide for the  
16 development, establishment and enforcement of basic standards  
17 for the care and treatment of individuals in hospitals and  
18 rural emergency hospitals and for the construction, maintenance  
19 and operation of such hospitals, which, in the light of  
20 existing knowledge, will promote safe and adequate treatment  
21 of such individuals in such hospitals, in the interest of the  
22 health, welfare and safety of the public.

23 Sec. \_\_\_\_\_. Section 135B.3, Code 2022, is amended to read as  
24 follows:

25 **135B.3 Licensure.**

26 No person or governmental unit, acting severally or jointly  
27 with any other person or governmental unit shall establish,  
28 conduct or maintain a hospital or rural emergency hospital in  
29 this state without a license.

30 Sec. \_\_\_\_\_. Section 135B.4, Code 2022, is amended to read as  
31 follows:

32 **135B.4 Application for license.**

33 Licenses shall be obtained from the department.  
34 Applications shall be upon forms and shall contain information  
35 as the department may reasonably require, which may include

1 affirmative evidence of ability to comply with reasonable  
2 standards and rules prescribed under [this chapter](#). Each  
3 application for license shall be accompanied by the license  
4 fee, which shall be refunded to the applicant if the license  
5 is denied and which shall be deposited into the state treasury  
6 and credited to the general fund if the license is issued.  
7 Hospitals and rural emergency hospitals having fifty beds or  
8 less shall pay an initial license fee of fifteen dollars;  
9 hospitals of more than fifty beds and not more than one hundred  
10 beds shall pay an initial license fee of twenty-five dollars;  
11 all other hospitals shall pay an initial license fee of fifty  
12 dollars.

13 Sec. \_\_\_\_\_. Section 135B.5, subsection 1, Code 2022, is  
14 amended to read as follows:

15 1. Upon receipt of an application for license and the  
16 license fee, the department shall issue a license if the  
17 applicant and hospital facilities comply with [this chapter](#),  
18 chapter 135, and the rules of the department. Each licensee  
19 shall receive annual reapproval upon payment of five hundred  
20 dollars and upon filing of an application form which is  
21 available from the department. The annual licensure fee shall  
22 be dedicated to support and provide educational programs on  
23 regulatory issues for hospitals and rural emergency hospitals  
24 licensed under [this chapter](#). Licenses shall be either general  
25 or restricted in form. Each license shall be issued only  
26 for the premises and persons or governmental units named in  
27 the application and is not transferable or assignable except  
28 with the written approval of the department. Licenses shall  
29 be posted in a conspicuous place on the licensed premises as  
30 prescribed by rule of the department.

31 Sec. \_\_\_\_\_. Section 135B.5A, Code 2022, is amended to read as  
32 follows:

33 **135B.5A Conversion of a ~~hospital~~ relative to certain**  
34 **hospitals.**

35 1. A conversion of a long-term acute care hospital,

1 rehabilitation hospital, or psychiatric hospital as defined by  
2 federal regulations to a general hospital or to a specialty  
3 hospital of a different type is a permanent change in bed  
4 capacity and shall require a certificate of need pursuant to  
5 section 135.63.

6 2. A conversion of a critical access hospital or general  
7 hospital to a rural emergency hospital or a conversion of a  
8 rural emergency hospital to a critical access hospital or  
9 general hospital shall not require a certificate of need  
10 pursuant to section 135.63.

11 Sec. \_\_\_\_\_. Section 135B.7, Code 2022, is amended to read as  
12 follows:

13 **135B.7 Rules and enforcement.**

14 1. *a.* The department, with the approval of the state  
15 board of health, shall adopt rules setting out the standards  
16 for the different types of hospitals and for rural emergency  
17 hospitals to be licensed under **this chapter**. The department  
18 shall enforce the rules.

19 *b.* Rules or standards shall not be adopted or enforced  
20 which would have the effect of denying a license to a hospital,  
21 rural emergency hospital, or other institution required to be  
22 licensed, solely by reason of the school or system of practice  
23 employed or permitted to be employed by physicians in the  
24 hospital, rural emergency hospital, or other institution if the  
25 school or system of practice is recognized by the laws of this  
26 state.

27 2. *a.* The rules shall state that a hospital or rural  
28 emergency hospital shall not deny clinical privileges to  
29 physicians and surgeons, podiatric physicians, osteopathic  
30 physicians and surgeons, dentists, certified health service  
31 providers in psychology, physician assistants, or advanced  
32 registered nurse practitioners licensed under **chapter 148,**  
33 **148C, 149, 152, or 153, or section 154B.7,** solely by reason of  
34 the license held by the practitioner or solely by reason of  
35 the school or institution in which the practitioner received

1 medical schooling or postgraduate training if the medical  
2 schooling or postgraduate training was accredited by an  
3 organization recognized by the council on higher education  
4 accreditation or an accrediting group recognized by the United  
5 States department of education.

6 *b.* A hospital or rural emergency hospital may establish  
7 procedures for interaction between a patient and a  
8 practitioner. The rules shall not prohibit a hospital or  
9 rural emergency hospital from limiting, restricting, or  
10 revoking clinical privileges of a practitioner for violation  
11 of hospital rules, regulations, or procedures established  
12 under this paragraph, when applied in good faith and in a  
13 nondiscriminatory manner.

14 *c.* *This subsection* shall not require a hospital or rural  
15 emergency hospital to expand the ~~hospital's~~ current scope of  
16 service delivery solely to offer the services of a class of  
17 providers not currently providing services at the hospital  
18 or rural emergency hospital. *This section* shall not be  
19 construed to require a hospital or rural emergency hospital  
20 to establish rules which are inconsistent with the scope of  
21 practice established for licensure of practitioners to whom  
22 this subsection applies.

23 *d.* *This section* shall not be construed to authorize the  
24 denial of clinical privileges to a practitioner or class of  
25 practitioners solely because a hospital or rural emergency  
26 hospital has as employees of the hospital or rural emergency  
27 hospital identically licensed practitioners providing the same  
28 or similar services.

29 3. The rules shall require that a hospital or rural  
30 emergency hospital establish and implement written criteria  
31 for the granting of clinical privileges. The written criteria  
32 shall include but are not limited to consideration of all of  
33 the following:

34 *a.* The ability of an applicant for privileges to provide  
35 patient care services independently and appropriately in the

1 hospital or rural emergency hospital.

2 *b.* The license held by the applicant to practice.

3 *c.* The training, experience, and competence of the  
4 applicant.

5 *d.* The relationship between the applicant's request for the  
6 granting of privileges and the hospital's or rural emergency  
7 hospital's current scope of patient care services, as well as  
8 the hospital's or rural emergency hospital's determination of  
9 the necessity to grant privileges to a practitioner authorized  
10 to provide comprehensive, appropriate, and cost-effective  
11 services.

12 4. The department shall also adopt rules requiring  
13 hospitals and rural emergency hospitals to establish and  
14 implement protocols for responding to the needs of patients who  
15 are victims of domestic abuse, as defined in [section 236.2](#).

16 5. The department shall also adopt rules requiring  
17 hospitals and rural emergency hospitals to establish and  
18 implement protocols for responding to the needs of patients who  
19 are victims of elder abuse, as defined in [section 235F.1](#).

20 Sec. \_\_\_\_\_. Section 135B.7A, Code 2022, is amended to read as  
21 follows:

22 **135B.7A Procedures — orders.**

23 The department shall adopt rules that require hospitals  
24 and rural emergency hospitals to establish procedures for  
25 authentication of all verbal orders by a practitioner within  
26 a period not to exceed thirty days following a patient's  
27 discharge.

28 Sec. \_\_\_\_\_. Section 135B.8, Code 2022, is amended to read as  
29 follows:

30 **135B.8 Effective date of rules.**

31 Any hospital or rural emergency hospital which is in  
32 operation at the time of promulgation of any applicable  
33 rules or minimum standards under [this chapter](#) shall be given  
34 a reasonable time, not to exceed one year from the date of  
35 such promulgation, within which to comply with such rules and

1 minimum standards.

2 Sec. \_\_\_\_\_. Section 135B.9, Code 2022, is amended to read as  
3 follows:

4 **135B.9 Inspections and qualifications for hospital and rural**  
5 **emergency hospital inspectors — protection and advocacy agency**  
6 **investigations.**

7 1. The department shall make or cause to be made inspections  
8 as it deems necessary in order to determine compliance with  
9 applicable rules. Hospital and rural emergency hospital  
10 inspectors shall meet the following qualifications:

11 a. Be free of conflicts of interest. A hospital or rural  
12 emergency hospital inspector shall not participate in an  
13 inspection or complaint investigation of a hospital or rural  
14 emergency hospital in which the inspector or a member of the  
15 inspector's immediate family works or has worked within the  
16 last two years. For purposes of this paragraph, "*immediate*  
17 *family member*" means a spouse; natural or adoptive parent,  
18 child, or sibling; or stepparent, stepchild, or stepsibling.

19 b. Complete a yearly conflict of interest disclosure  
20 statement.

21 c. Biennially, complete a minimum of ten hours of continuing  
22 education pertaining to hospital or rural emergency hospital  
23 operations including but not limited to quality and process  
24 improvement standards, trauma system standards, and regulatory  
25 requirements.

26 2. In the state resource centers and state mental health  
27 institutes operated by the department of human services, the  
28 designated protection and advocacy agency as provided in  
29 section 135C.2, subsection 4, shall have the authority to  
30 investigate all complaints of abuse and neglect of persons  
31 with developmental disabilities or mental illnesses if the  
32 complaints are reported to the protection and advocacy agency  
33 or if there is probable cause to believe that the abuse has  
34 occurred. Such authority shall include the examination of all  
35 records pertaining to the care provided to the residents and

1 contact or interview with any resident, employee, or any other  
2 person who might have knowledge about the operation of the  
3 institution.

4 Sec. \_\_\_\_\_. Section 135B.12, Code 2022, is amended to read as  
5 follows:

6 **135B.12 Confidentiality.**

7 The department's final findings or the final survey findings  
8 of the joint commission on the accreditation of health care  
9 organizations or the American osteopathic association with  
10 respect to compliance by a hospital or rural emergency hospital  
11 with requirements for licensing or accreditation shall be made  
12 available to the public in a readily available form and place.  
13 Other information relating to a hospital or rural emergency  
14 hospital obtained by the department which does not constitute  
15 the department's findings from an inspection of the hospital  
16 or rural emergency hospital or the final survey findings of  
17 the joint commission on the accreditation of health care  
18 organizations or the American osteopathic association shall  
19 not be made available to the public, except in proceedings  
20 involving the denial, suspension, or revocation of a license  
21 under [this chapter](#). The name of a person who files a complaint  
22 with the department shall remain confidential and shall not  
23 be subject to discovery, subpoena, or other means of legal  
24 compulsion for its release to a person other than department  
25 employees or agents involved in the investigation of the  
26 complaint.

27 Sec. \_\_\_\_\_. Section 135B.14, Code 2022, is amended to read as  
28 follows:

29 **135B.14 Judicial review.**

30 Judicial review of the action of the department may be sought  
31 in accordance with [chapter 17A](#). Notwithstanding the terms of  
32 chapter 17A, the Iowa administrative procedure Act, petitions  
33 for judicial review may be filed in the district court of the  
34 county in which the hospital or rural emergency hospital is  
35 located or to be located, and the status quo of the petitioner

1 or licensee shall be preserved pending final disposition of the  
2 matter in the courts.

3 Sec. \_\_\_\_\_. Section 135B.15, Code 2022, is amended to read as  
4 follows:

5 **135B.15 Penalties.**

6 Any person establishing, conducting, managing, or operating  
7 any hospital or rural emergency hospital without a license  
8 shall be guilty of a serious misdemeanor, and each day of  
9 continuing violation after conviction shall be considered a  
10 separate offense.

11 Sec. \_\_\_\_\_. Section 135B.16, Code 2022, is amended to read as  
12 follows:

13 **135B.16 Injunction.**

14 Notwithstanding the existence or pursuit of any other  
15 remedy, the department may, in the manner provided by law,  
16 maintain an action in the name of the state for injunction  
17 or other process against any person or governmental unit to  
18 restrain or prevent the establishment, conduct, management or  
19 operation of a hospital or rural emergency hospital without a  
20 license.

21 Sec. \_\_\_\_\_. Section 135B.20, subsection 3, Code 2022, is  
22 amended to read as follows:

23 3. "*Hospital*" ~~shall mean~~ means all hospitals and rural  
24 emergency hospitals licensed under this chapter.

25 Sec. \_\_\_\_\_. Section 135B.33, subsection 1, unnumbered  
26 paragraph 1, Code 2022, is amended to read as follows:

27 Subject to availability of funds, the Iowa department of  
28 public health shall provide technical planning assistance to  
29 local boards of health and hospital or rural emergency hospital  
30 governing boards to ensure access to ~~hospital~~ such services in  
31 rural areas. The department shall encourage the local boards  
32 of health and hospital or rural emergency hospital governing  
33 boards to adopt a long-term community health services and  
34 developmental plan including the following:

35 Sec. \_\_\_\_\_. Section 135B.34, subsection 7, Code 2022, is

1 amended to read as follows:

2 7. For the purposes of [this section](#), ~~“comprehensive~~  
3 ~~preliminary background check”~~:

4 a. “Comprehensive preliminary background check” means the  
5 same as defined in [section 135C.1](#).

6 b. “Hospital” means a hospital or rural emergency hospital  
7 licensed under this chapter.

8 Sec. \_\_\_\_ . EFFECTIVE DATE. This division of this Act, being  
9 deemed of immediate importance, takes effect upon enactment.>

10 3. Title page, line 1, after <relating to> by inserting  
11 <health care, health care facilities, and health services  
12 including>

13 4. Title page, lines 3 and 4, by striking <and providing  
14 for licensee discipline> and inserting <the application of the  
15 certificate of need process, and licensure of rural emergency  
16 hospitals, providing for licensee discipline, and including  
17 effective date provisions.>

18 5. By renumbering as necessary.

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COMMITTEE ON HUMAN RESOURCES  
JEFF EDLER, CHAIRPERSON